

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>American Action Network</b>		3. FEC Identification Number <b>C</b> C90011230
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1747 Pennsylvania Avenue, NW 5th Floor		
(c) City, State and ZIP Code Washington DC 20006		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

M M M	/	D D D	/	Y Y Y Y Y Y

5. COVERING PERIOD:

FROM 

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2016

THROUGH 

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES .....	401522.92

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Caleb Crosby	Caleb Crosby	07/15/2016
	<i>[Electronically Filed]</i>	

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N

Transaction ID :

American Action Network reviewed its July Quarterly report prior to filing and the report is complete as filed. American Action Network had no contributions requiring disclosure.

Form/Schedule:

Transaction ID:

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
American Action Network

Full Name (Last, First, Middle Initial) of Payee IMGE		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 03 / 2016	
Mailing Address 108 South Washington St. 3rd Floor		Amount 23250.00	
City Alexandria	State VA	Zip Code 22314	
Purpose of Expenditure Media production and placement		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Hudson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 36860.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 03 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 25000.00	
City San Diego	State CA	Zip Code 92119	
Purpose of Expenditure Phone calls		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 157036.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Connection Strategy, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 02 / 2016	
Mailing Address PO Box 2192		Amount 13610.85	
City Arlington	State VA	Zip Code 22202	
Purpose of Expenditure Phone calls		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Hudson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13610.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	61860.85
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
American Action Network

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination 06 / 01 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 27713.63	
City San Diego	State CA	Zip Code 92119	Transaction ID : 004
Purpose of Expenditure Direct mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 132036.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination 05 / 31 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 27771.07	
City San Diego	State CA	Zip Code 92119	Transaction ID : 005
Purpose of Expenditure Direct mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 76551.52		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination 05 / 31 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 27771.19	
City San Diego	State CA	Zip Code 92119	Transaction ID : 006
Purpose of Expenditure Direct mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 104322.71		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	83255.89
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
American Action Network

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination 05 / 28 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 28780.45	
City San Diego	State CA	Zip Code 92119	
Purpose of Expenditure Direct mail		Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28780.45		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Revolvis Consulting		Date of Public Distribution/Dissemination 05 / 30 / 2016	
Mailing Address 7185 Navajo Rd. Suite P		Amount 20000.00	
City San Diego	State CA	Zip Code 92119	
Purpose of Expenditure Media placement		Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Helene Schneider		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 48780.45		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Del Cielo Media LLC		Date of Public Distribution/Dissemination 04 / 19 / 2016	
Mailing Address 1427 Leslie Avenue Suite 102		Amount 146650.00	
City Alexandria	State VA	Zip Code 22301	
Purpose of Expenditure Media placement		Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Shuster		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 146650.00		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	195430.45
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
American Action Network

Full Name (Last, First, Middle Initial) of Payee Strategic Perception Inc.		Date of Public Distribution/Dissemination 04 / 19 / 2016	
Mailing Address 6158 Mulholland Highway		Amount 16975.73	
City Hollywood	State CA	Zip Code 90068	
Purpose of Expenditure Media production		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Shuster		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 163625.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craft Media/Digital		Date of Public Distribution/Dissemination 04 / 19 / 2016	
Mailing Address 1600 K Street NW Suite 300		Amount 30000.00	
City Washington	State DC	Zip Code 20006	
Purpose of Expenditure Media placement and production		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Shuster		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 193625.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 04 / 21 / 2016	
Mailing Address 2300 Clarendon Blvd. Suite 303		Amount 14000.00	
City Arlington	State VA	Zip Code 22201	
Purpose of Expenditure GOTV Phone calls		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Shuster		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 207625.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	60975.73
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	401522.92